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1639

Use in lieu of PTO/SB/17 (08-03)
(Form updated to reflect FY 2004 fees effective 10/1/03)

FEE TRANSMITTAL for FY 2004		Complete if Known		
Effective 10/01/2003, Patent fees are subject to annual revision.		Application Number	10/031131	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	March 15, 2002	
TOTAL AMOUNT OF PAYMENT (\$)		1,005.00	First Named Inventor	Zoltan Konthur
		Attorney Docket No.	VOSS-P01-001	
		Examiner Name	My Chau T. Tran	
		Art Unit	1639	
		RECEIVED OCT 31 2003 TECH CENTER 1600/2900		
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)		
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES		
<input checked="" type="checkbox"/> Deposit Account:		Large Entity Small Entity		
Deposit Account Number		Fee Fee Fee Fee		
18-1945		Code (\$) Code (\$) Code (\$) Code (\$)		
Deposit Account Name		Fee Description		
Ropes & Gray LLP		Fee Paid		
The Director is authorized to: (check all that apply)		1051 130 2051 65 Surcharge - late filing fee or oath		
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments		1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet		
<input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application		1053 130 1053 130 Non-English specification		
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		1812 2,520 1812 2,520 For filing a request for <i>ex parte</i> reexamination		
		1804 920* 1804 920* Requesting publication of SIR prior to Examiner action		
		1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action		
		1251 110 2251 55 Extension for reply within first month		
		1252 420 2252 210 Extension for reply within second month		
		1253 950 2253 475 Extension for reply within third month		
		1254 1,480 2254 740 Extension for reply within fourth month		
		1255 2,010 2255 1,005 Extension for reply within fifth month		
		1401 330 2401 165 Notice of Appeal		
		1402 330 2402 165 Filing a brief in support of an appeal		
		1403 290 2403 145 Request for oral hearing		
		1451 1,510 1451 1,510 Petition to institute a public use proceeding		
		1452 110 2452 55 Petition to revive - unavoidable		
		1453 1,330 2453 665 Petition to revive - unintentional		
		1501 1,330 2501 665 Utility issue fee (or reissue)		
		1502 480 2502 240 Design issue fee		
		1503 640 2503 320 Plant issue fee		
		1460 130 1460 130 Petitions to the Commissioner		
		1807 50 1807 50 Processing fee under 37 CFR 1.17(q)		
		1806 180 1806 180 Submission of Information Disclosure Stmt		
		8021 40 8021 40 Recording each patent assignment per property (times number of properties)		
		1809 770 2809 385 Filing a submission after final rejection (37 CFR 1.129(a))		
		1810 770 2810 385 For each additional invention to be examined (37 CFR 1.129(b))		
		1801 770 2801 385 Request for Continued Examination (RCE)		
		1802 900 1802 900 Request for expedited examination of a design application		
		Other fee (specify)		
		*Reduced by Basic Filing Fee Paid		
		SUBTOTAL (3) (\$)		
		1,005.00		
FEE CALCULATION				
1. BASIC FILING FEE				
Large Entity Small Entity				
Fee Fee Fee Fee				
Code (\$) Code (\$) Code (\$) Code (\$)				
1001 770 2001 385 Utility filing fee				
1002 340 2002 170 Design filing fee				
1003 530 2003 265 Plant filing fee				
1004 770 2004 385 Reissue filing fee				
1005 160 2005 80 Provisional filing fee				
SUBTOTAL (1) (\$)		0.00		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE				
Total Claims		Extra Claims Fee from below Fee Paid		
Independent Claims		Fee Paid		
Multiple Dependent		Fee Paid		
Large Entity Small Entity				
Fee Fee Fee Fee				
Code (\$) Code (\$) Code (\$) Code (\$)				
1202 18 2202 9 Claims in excess of 20				
1201 86 2201 43 Independent claims in excess of 3				
1203 290 2203 145 Multiple dependent claim, if not paid				
1204 86 2204 43 ** Reissue independent claims over original patent				
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent				
SUBTOTAL (2) (\$)		0.00		
**or number previously paid, if greater; For Reissues, see above				
SUBMITTED BY		(Complete if applicable)		
Name (Print/Type)		Registration No.		
David P. Halstead, Ph.D.		44,735		
Telephone		(617) 951-7615		
Signature		Date		
October 22, 2003				

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: October 22, 2003

Signature: Mary Jane DiPalma (Mary Jane DiPalma)